VIRGINIA
Department of Health Professions

Virginia Board of Counseling Supervision Summit

September 9, 2016

Who qualifies as a supervisor?

- Virginia licensee with an active, unrestricted license in the jurisdiction where supervision is being provided, with at least two (2) years of post-licensure clinical experience
  - LPC's can supervise Residents in Counseling, Residents in Marriage and Family Therapy and Residents in Substance Abuse Treatment
  - LMFT's can supervise Residents in Counseling and Residents in Marriage and Family Therapy
  - LSATP's can supervise Residents in Substance Abuse Treatment

- Provide documentation of professional training in supervision
  - Three (3) semester credit or four (4) quarter credit hours in supervision, or at least 20 hours of continuing education in supervision
  - CE provider must meet the same requirements for renewal CE's

NOTE: *Supervisors who are licensed as school psychologists, clinical psychologists, clinical social workers, psychiatrists, or LSATP's (except for supervision of Residents in Substance Abuse Treatment) and have been approved to provide supervision may continue to do so until August 24, 2017.*

HOW CAN A LICENSEE RECEIVE BOARD APPROVAL TO SUPERVISE RESIDENTS?

1. Complete registration forms to supervise a specific Resident and submit the supervision training documentation

OR

2. Complete the "Supervisor Approval Application" and submit it to the Board along with documentation of supervision training.

NOTE: *Once a licensee's supervision application is approved, or they are approved for supervision of a specific Resident, the licensee is added to the supervisor registry. This registry is located on the Board of Counseling website at www.dhp.virginia.gov/Counseling and is updated quarterly.*

What are my responsibilities as a supervisor?

"Supervision" means the ongoing process performed by a supervisor who monitors the performance of the person supervised and provides regular, documented individual or group consultation, guidance and instruction that is specific to the clinical counseling services being performed with respect to the clinical skills and competencies of the person supervised.

- The supervisor and resident must receive board approval prior to beginning the supervised residency.

- The supervisor shall assume full responsibility for the clinical activities of the board-approved resident, specified within the supervisory contract for the duration of the residency.
  - *Note: It is important for supervisors to be aware of the resident's practice. If the resident has other board-approved supervisors, you may consider maintaining open communication with the supervisor(s) to ensure the resident's ethical and competent practice.*

- Supervisors are responsible for notifying the Board upon termination of supervision.
  - "Request for termination of supervision" form

- Residents shall not engage in practice under supervision in any areas for which they have not had the appropriate education.

- Residents may not directly bill for services rendered.
  - Residents in private practice

- Residents may not represent themselves as independent, autonomous practitioners, and shall inform clients in writing of the resident's status and the supervisor's name, professional address and phone number.

- During the residency, residents shall use their names, initials of their degree, and the applicable title in all written communications:
  - LPC residents shall use "Resident in Counseling"
  - LMFT residents shall use "Resident in Marriage and Family Therapy"
  - LSATP residents shall use "Resident in Substance Abuse Treatment"

- Residents who continue to provide clinical counseling services are required to stay under board-approved supervision until they are licensed, unless exempt from requirements of licensure in § 54.1-3501 of the *Code of Virginia.*

EVALUATION AND VERIFICATION OF SUPERVISION

Quarterly Evaluations

- Reports must be completed quarterly by the supervisor. Supervisors may use a business quarter schedule or may begin the quarter based on the resident's approval date.

- Quarterly reports should be provided by the resident and submitted together in the application package.

Verification of Supervision form

- Verification must be completed by the supervisor regarding the resident's competency level for independent practice, as well as the total hours of residency.
  - Counting required experience hours
  - Counting supervision hours
    - Hour vs. therapeutic hour
    - Amount of residents allowed in individual supervision.
  - Ancillary vs. clinical counseling services
    - Mental Health Skill Building
    - Supervisor-assigned research
    - Private practice setup

RESIDENCY REQUIREMENTS

Residents in Counseling

(towards licensure as a Professional Counselor)

The supervised residency shall be completed with various populations, clinical problems and theoretical approaches in certain areas. Core areas to be included in the supervised residency:

- Assessment and diagnosis using psychotherapy techniques;
- Appraisal, evaluation and diagnostic procedures;
- Treatment planning and implementation;
- Case management and recordkeeping;
- Professional counselor identity and function; and,
- Professional ethics and standards of practice.

Residents in Counseling (cont'd)

Residency experience:

The residency shall be completed in not less than 21 months or more than four (4) years. Residents who began a residency before August 24, 2016 shall complete the residency by August 24, 2020.

3,400-hour supervised residency, to include at least 2,000 hours of face-to-face client contact in providing clinical counseling services. The remaining hours may be spent in the performance of ancillary counseling services.

"Ancillary Counseling Services" means activities such as case management, recordkeeping, referral, and coordination of services.

"Clinical Counseling Services" means activities such as assessment, diagnosis, treatment planning and treatment implementation

"Face-to-Face" means the in-person delivery of clinical counseling services.

Residents in Counseling (cont'd)

In addition to the required experience, the residency shall include a minimum of **200 hours** of in-person supervision between supervisor and resident in the consultation and review of clinical counseling services provided by the Resident.

- For every 40 hours of experience documented by the Resident, a minimum of one (1) hour and a maximum of four (4) hours of supervision shall occur.
- "In-person" may include the use of secured technology that maintains client confidentiality and provides real-time, visual contact between the supervisor and the resident.
- No more than half of the 200 hours may be satisfied with group supervision. "Group supervision" means the process of clinical supervision of no more than six (6) persons in a group setting provided by a qualified supervisor.
- One (1) hour of group supervision will be deemed equivalent to one (1) hour of individual supervision.
- At least 100 of the 200 hours of supervision must be completed with an LPC.

Residents in Marriage and Family Therapy

(towards licensure as a Marriage and Family Therapists)

The supervised residency shall be completed with various populations, clinical problems and theoretical approaches in certain areas. Core areas to be included in the supervised residency:

- Marriage and family studies (marital and family development; family systems theory)
- Marriage and family therapy (systemic therapeutic interventions and application of major theoretical approaches)
- Human growth and development across the lifespan
- Abnormal behaviors
- Diagnosis and treatment of addictive behaviors
- Multicultural counseling
- Professional identity and ethics
- Research (research methods; quantitative methods; statistics)
- Assessment and treatment (appraisal, assessment and diagnostic procedures)

Residents in Marriage and Family Therapy (cont'd)

Residency experience:

The residency shall be completed in not less than 21 months or more than four (4) years. Residents who began a residency before August 24, 2016 shall complete the residency by August 24, 2020.

- 3,400-hour supervised residency in the role of a marriage and family therapist.

- At least 2,000 hours shall be in clinical marriage and family services, of which 1,000 hours shall be face-to-face client contact with couples or families or both. The remaining hours may be spent in the performance of ancillary counseling services.

"Ancillary Counseling Services" means activities such as case management, recordkeeping, referral, and coordination of services.

"Clinical marriage and family services" means activities such as assessment, diagnosis, and treatment planning and treatment implementation for couples and families.

"Face-to-Face" means the in-person delivery of clinical marriage and family services for a client.

Residents in Marriage and Family Therapy (cont'd)

In addition to the required experience, the residency shall include a minimum of **200 hours** of in-person supervision with the supervisor in the consultation and review of marriage and family services provided by the resident.

- For every 40 hours of experience documented by the Resident, a minimum of one (1) hour and a maximum of four (4) hours of supervision shall occur.
- "In-person" may include the use of secured technology that maintains client confidentiality and provides real-time, visual contact between the supervisor and the resident.
- No more than half of the 200 hours may be satisfied with group supervision. "Group supervision" means the process of clinical supervision of no more than six (6) persons in a group setting provided by a qualified supervisor.
- One (1) hour of group supervision will be deemed equivalent to one (1) hour of individual supervision.
- At least 100 of the 200 hours of supervision must be completed with an LMFT.

Residents in Substance Abuse Treatment

(towards licensure as a Substance Abuse Treatment Practitioners)

The supervised residency shall be completed with various populations, clinical problems and theoretical approaches in certain areas. Core areas to be included in the supervised residency:

- Clinical evaluation
- Treatment planning, documentation and implementation
- Referral and service coordination
- Individual and group counseling and case management
- Professional and ethical responsibility

Residents in Substance Abuse Treatment (cont'd)

Residency experience:

The residency shall be completed in not less than 21 months or more than four (4) years. Residents who began a residency before August 24, 2016 shall complete the residency by August 24, 2020.

- 3,400-hour supervised residency in the role of a substance abuse treatment practitioner.
- At least 2,000 hours of face-to-face client contact in providing clinical substance abuse treatment services with individuals, families or groups of individuals suffering from the effects of substance abuse or dependence. The remaining hours may be spent in the performance of ancillary services.

"Ancillary services" means activities such as case management, recordkeeping, referral, and coordination of services.

"Clinical substance abuse treatment services" means activities such as assessment, diagnosis, treatment planning and treatment implementation.

"Face-to-Face" means the in-person delivery of clinical substance abuse treatment services for a client.

Residents in Substance Abuse Treatment (cont'd)

In addition to the required experience, the residency shall include a minimum of **200 hours** of in-person supervision between the supervisor and resident.

- For every 40 hours of experience documented by the Resident, a minimum of one (1) hour and a maximum of four (4) hours of supervision shall occur.
- "In-person" may include the use of secured technology that maintains client confidentiality and provides real-time, visual contact between the supervisor and the resident.
- No more than half of the 200 hours may be satisfied with group supervision. "Group supervision" means the process of clinical supervision of no more than six (6) persons in a group setting provided by a qualified supervisor.
- One (1) hour of group supervision will be deemed equivalent to one (1) hour of individual supervision.
- At least 100 of the 200 hours of supervision must be completed with an LSATP.

COMPLAINTS AND DISCIPLINARY ACTION RELATED TO SUPERVISION

- Dual relationship
- Undocumented concerns regarding the resident's competency
- Resident's unethical practice; failure to report
- Allowing a resident to practice outside of the scope of education and training
- Submission of verification forms by fraud or misrepresentation
- Refusal to complete the verification forms

Additional topics:

- Issuance of registration numbers

Question and Answer